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UNCLAS SECTION 01 OF 02 ANKARA 004177

SIPDIS

STATE FOR EUR/SE, EUR/PGI, OES/PCI, OES/IHA (GALLAGHER,  
DILDAY)  
PLEASE PASS EPA (BFREEMAN, HHUYNH), HHS (FIC)

E.O.12958: N/A

TAGS: [SENV](#) [TBIO](#) [PGOV](#) [ECON](#) [TU](#)

SUBJECT: STATUS OF HIV/AIDS: LOW PREVALENCE, LOW PRIORITY

REF: SECSTATE 14643

1. Post used the delivery of Ref A materials on the President's Emergency Plan for AIDS Relief to obtain updated information on HIV/AIDS in Turkey from the Ministry of Health (MOH), Ministry of Foreign Affairs and UN Population Fund. The institutions appreciated receiving the materials, acknowledged U.S. leadership in HIV/AIDS programming, and agree that developed nations need to provide support for AIDS prevention. The MOH requested that Turkey be considered for participation in any worldwide training that might be offered.

Incidence of HIV/AIDS is low  
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2. The MOH General Directorate of Primary Health Care reports that at the end of 2002, there were 1,515 HIV/AIDS cases in Turkey: 1,063 HIV and 452 AIDS. Since 1992, those numbers have been relatively stable, with fewer than 50 new AIDS cases reported each year. The incidence of new HIV cases have been low but steady since 1997, with the greatest increase in 2001 of 144 new cases. There were 142 new HIV cases in 2002.

3. Seventy (70) percent of HIV/AIDS patients are male. Most are between the ages of 20 and 39. The source of about half the cases is heterosexual contact. Drug use accounts for about 6.5 percent of the cases and blood transfusions for less than three (3) percent. The source of about a third of the cases is considered unknown. Istanbul has the highest prevalence of HIV/AIDS cases.

4. Healthcare professionals acknowledge that there are insufficient mechanisms for tracking HIV/AIDS patients and that an inadequate legislative base leads to under reporting. In 2002, a representative from the CDC office of Public Health and Practice found that Turkey has literally no system for monitoring any infectious disease, let alone HIV. The World Health Organization estimates that Turkey's HIV/AIDS incidence estimates are likely to be off by a factor of 50.

Key Milestones, Programs  
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5. MOH became active in AIDS prevention upon detecting the first case in Turkey in 1985. AIDS testing began back then and is now offered free of charge. Over the years, outreach expanded to include establishing a National Advisory Committee, supporting sexual health education in schools, distributing free condoms, providing disposable syringes, covering health care costs for patients, and instituting a telephone information line. Provincial health managers have received training in sexually transmitted diseases. (Note: Some programs offered are costly, yet MOH officials could not provide a budget estimate for HIV/AIDS prevention, treatment or testing. End note.) Turkey also works cooperatively with international organizations such as WHO, UNFPA, UNICEF, and UNAIDS.

6. In 1996, GOT formed a multi-sectoral National AIDS Committee (NAC). The Prime Minister leads it, MOH supports it, and 32 ministries, institutions, professional associations, and NGOs are represented on it. The NAC adopted the country's first National Strategic Action Plan last year. Its primary goals are to educate the public, ensure safe blood supply, standardize testing, provide counseling, ensure legislation is respectful to individuals, and improve monitoring. The NAC will monitor these targets.

17. Despite these efforts, Turkey's HIV/AIDS infrastructure operates at a minimal level. Post's healthcare provider finds that Turkey has demonstrated minimal commitment to following accepted epidemiological procedures. Professionals are insufficiently trained, data are unreliable and public awareness is low. Mission employees rarely see any of the public educational materials purportedly disseminated on the media and in schools. Even with the Prime Minister heading the NAC, most professionals agree that policy-makers rate HIV/AIDS a low priority. Turkey did not participate in the XIV International AIDS conference in Barcelona in July 2002.

18. That said, MOH has submitted a \$6.5 million proposal to the Global AIDS Fund. Winning such a grant would provide the boost needed to fully implement Turkey's national strategic action plan and invigorate education, prevention and treatment programs.

Comment

19. Thus far, Turkey seems to have dodged the HIV/AIDS bullet. Some attribute this to conservative family values, others to geographic luck. But this luck might not continue. The inability to track the sex-trade industry, prevent heroin trafficking from Afghanistan, and stem the tide of a potentially exponentially increasing epidemic over time requires vigilance, support, and a higher priority than HIV/AIDS now receives.  
PEARSON